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PTO/SB/21 (02-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/666,799
	Filing Date	09/18/2003
	First Named Inventor	Robert M. H. Dunn
	Art Unit	2161
	Examiner Name	Chelcie L. Daye
Total Number of Pages in This Submission	Attorney Docket Number	CA920030059US1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Replacement to Original Fig. 1		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Volel Emile	
Signature		
Date	09/14/2006	

CERTIFICATE OF TRANSMISSION/MAILING			
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Appl. No. 10/666,799
Transmittal of Response dated 09/14/2006
Reply to Office Action of 06/14/2006



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of: :
Robert M. H. Dunn :
Serial No: 10/666,799 : Before the Examiner:
Chelcie L. Daye
Filed: 09/18/2003 : Group Art Unit: 2161
Title: STOREPATH FOR SHARING : Confirmation No.: 9024
COMMERCE ASSETS :
:

AMENDMENT TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified Application.

 No additional fee is required
 X The fee has been calculated as shown below:

	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra	Rate	Addit. Fee
Total	20	MINUS	21	=	0	x 50 =	\$ 0.00
Indep.	4	MINUS	4	=	0	x 200 =	\$ 0.00
1st Presentation of Multiple Dep. Claim						x 360 =	\$ 0.00

TOTAL \$ 0.00

 Please charge my Deposit Account No. **09-0447** in the amount of \$ **0.00**.
CA920030059US1

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A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0447. A duplicate copy of this sheet is enclosed.

X Any additional fees required under 37 CFR §1.16 for the presentation of extra claims.

X Any patent application processing fees under 37 CFR §1.17.

Respectfully Submitted

By: 

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